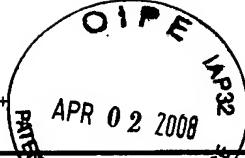


Please type a plus sign (+) inside this box →

HDP/SB/21 based on PTO/SB/21 (08-00)

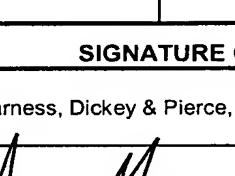
~~John Rees #~~

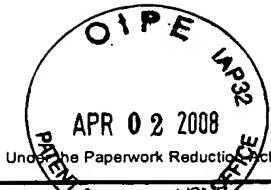


TRANSMITTAL FORM

APR 02 2000 (to be used for all correspondence after initial filing)

Application Number	10/602,880
Filing Date	June 25, 2003
Inventor(s)	Kang Soo SEO et al.
Group Art Unit	2621
Examiner Name	Heather Rae Jones
Attorney Docket Number	46500-0000535/US

ENCLOSURES (check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Letter to the Official Draftsperson and _____ Sheets of Formal Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> LETTER SUBMITTING APPEAL BRIEF AND APPEAL BRIEF (w/clean version of pending claims) <input type="checkbox"/> Appeal Communication to Group <i>(Notice of Appeal, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> - Request for Continued Examination (RCE) Transmittal
Remarks			
MAIL STOP: RCE			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual name	Harness, Dickey & Pierce, P.L.C.		Attorney Name Aaron A. Mace
Signature			
Date	April 2, 2008		



APR 02 2008
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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FEE TRANSMITTAL for FY 2008

Effective 2/8/2006. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 910)

Complete If Known

Application Number	10/602,880
Filing Date	June 25, 2003
First Named Inventor	Kang Soo SEO et al.
Examiner Name	Heather Rae Jones
Art Unit	2621
Attorney Docket No.	46500-000535/US

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Other None
Order

Deposit Account:

Deposit Account Number 08-0750
Deposit Account Name

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1011 310	2011 155	Utility filing fee	
1012 210	2012 105	Design filing fee	
1013 210	2013 105	Plant filing fee	
1014 310	2014 155	Reissue filing fee	
1005 210	2005 105	Provisional filing fee	
SUBTOTAL (1)			(\$ 0)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

	Extra Claims	Fee from below	Fee Paid
Total Claims 28	-26 **	= 2 X 50	= 100
Independent Claims 6	-7 **	= 0 X 0	= 0
Multiple Dependent			= 0

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1202 50	2202 25	Claims in excess of 20
1201 210	2201 105	Independent claims in excess of 3
1203 370	2203 185	Multiple dependent claim, if not paid
1204 210	2204 105	** Reissue independent claims over original patent
1205 50	2205 25	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		(\$ 100)

***or number previously paid, if greater; For Reissues, see above*

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	SurchARGE - late filing fee or oath	
1052	50	2052	25	SurchARGE - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	120	2251	60	Extension for reply within first month	
1252	460	2252	230	Extension for reply within second month	
1253	1,050	2253	525	Extension for reply within third month	
1254	1,640	2254	820	Extension for reply within fourth month	
1255	2,230	2255	1,115	Extension for reply within fifth month	
1401	510	2401	255	Notice of Appeal	
1402	510	2402	255	Filing a brief in support of an appeal	
1403	1,030	2403	515	Request for oral hearing	
1452	510	2452	255	Petition to revive – unavoidable	
1453	1,540	2453	770	Petition to revive – unintentional	
1462	400	1462	400	Petition fee under 37 CFR 1.17(f)	
1463	200	1463	200	Petition fee under 37 CFR 1.17(g)	
1464	130	1464	130	Petition fee under 37 CFR 1.17(h)	
1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	810	2809	405	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	810	2810	405	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	810	2801	405	Request for Continued Examination (RCE)	810
Other fee (specify) _____					
*Reduced by Basic Filing Fee Paid				SUBTOTAL (3)	(\$ 810)

4. SEARCH/EXAMINATION FEES

1111	510	2111	255	Utility Search Fee	
1112	100	2112	50	Design Search Fee	
1113	310	2113	155	Plant Search Fee	
1114	510	2114	255	Reissue Search Fee	
1311	210	2311	105	Utility Examination Fee	
1312	130	2312	65	Design Examination Fee	
1313	160	2313	80	Plant Examination Fee	
1314	620	2314	310	Reissue Examination Fee	
SUBTOTAL (4)				(\$ 0)	

SUBMITTED BY

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Aaron A. Mace	Registration No. (Attorney/Agent)	61,812	Telephone 703-668-8000
Signature			Date	April 2, 2008

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.